

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION	2/2/01		2/2/01
O.I.P.E. CLASSIFIER		49	7/20/01
FORMALITY REVIEW	B2	TC3-883	08-23-01
RESPONSE FORMALITY REVIEW	STAP	11(0)	10-15-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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926-4/81  
 573  
 10-15-01